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LITY PPLICATION

Attorney Docket No.		081513-39						
First In	ventor	Marcos C. TZANNES						
Title		Systems And Methods for A Multicarrier Modulation System with A Variable Margin						

TRANSMITTAL	Title Systems And Methods for A Muticarrier Modulation System with A Variable Margin				
Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231				
 I. ■ Fee Transmittal Form (e.g., PTO/SB/17) (shiwnt an oranged and a deplored per percensary) □ Applicant claims small entity status. See 37 CFR 1.27. I. ■ Specification (Total Pages 18) (referred arangement set for the follow) □ Descriptive title of the invention □ Cross Reference to Retained Applications Reference to sequence Issing, a table, or a computer program Issing appendix 	7. ☐ CD-ROM or CD-R: in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amimo Acid Sequence Submission (fyaphcable, all necessary) a. ☐ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies; or ii. ☐ paper c. ☐ Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS				
Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure Market of the Disclosure Total Sheets 2] Onth or Declaration Market Order Description of the Order Sheets 2] Market Description of Declaration Market Description of Description of Declaration Market Description of Desc	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)				
a. Tevery ecuacy (originat or cycle) for continuationalisticational with Base 18 completedly for continuationalisticational with Base 18 completedly i. DelETION OF INVENTORIS! Signed statement attached deletting inventor(s) 1.63(b(2)) and 1.34(beation, see 57 CFR 1.76 Application Data Sheet. See 37 CFR 1.76	14. ☑ Return Receipt Postcard (MPEP 93) (Should be specifically itemized) 15. □ Certified Copy of Prority Document(s) (if foreign priority is claimed) 16. □ Request and Certification under 35 U.S.C. 12 (b)(2)(B)(1). Applicant must attach form PTO/SB/35 or its equivalent. 17. □ Other:				
18. If a CONTINUING APPLICATION, check appropriate box, and s or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP)					
Prior application information: Examiner	Group / Art Unit:				
To CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under					

incorporation can only be relied upon when a portion bas been inadvertently omitted from the sub 19. CORRESPONDENCE ADDRESS E Customer Number or Bar Code Label 22204 (Insert Customer No. or Attach bar code label here) ■ Correspondence address below Jason H. Vick Name NIXON PEABODY LLF Address 8180 Greensboro Drive, Suite 800 City McLean State VA Telephone Country United States (703) 790-9110 Fax (703) 883-0370

Registration No. (Attorney/Agent)

45,285

Signature Date April 18, 2001 Burden Hour Statement: this form's estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any compens on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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Jason H. Vick

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FEE TRANSMI	TTAL.	Application Number					
FOR FY 20		Filmg Date	April 18, 2001 Marcos C. TZANNES				
FOR F 1 200	01	First Named Inventor					
		Examiner Name					
Patent fees are subject to annua	l revision.	Group Art Unit					
TOTAL AMOUNT OF PAYMENT \$ 1,640.00		Attorney Docket No.	081513-59				

TOTAL AMOUNT OF PAYMENT \$ 1,640.00					Atto	mey Do	cket N	081513-59			
METHOD OF PAYMENT				FEE CALCULATION (continued)							
res				3. ADDITIONAL FEES							
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to				e Entity							
Deposit Account Number				Fec Code	Fee (S)	Fee Code	Fee (\$)	Fee Description Fee Paid			
					105	130	205	65	Surcharge - late filing fee or oath		
Deposit Account Name	Nixon Peabody LLP			127	50	227	25	Surcharge - late provisional filing fee or cover sheet			
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	nt En	closed:			115	110	215	55	Extension for reply within first month		
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			Order		117	890	217	445	Extension for reply within third month		
12			LCULATION		118	1,390	218	695	Extension for reply within fourth month		
1. BASIC FIL		EE ill Entity			128	1,890	228	945	Extension for reply within fifth month		
Fec Fee	Fee	Fee	Fee Description		119	310	219	155	Notice of Appeal		
Code (S)	Cod			Fee Paid	120	310	220	155	Filing a brief in support of an appeal		
1gi 710	201	355	Utility filing fee	710.00	121	270	221	135	Request for oral hearing		
196 320	206	160	Design filing fee	\vdash	138 140	1,510	138 1 240		Petition to institute a public use proceeding		
167 490	207	245	Plant filing fee					55	Petition to revive - unavoidable		
198 710	208	355 Reissue filing fee		141	1,240	241	620	Petition to revive – unintentional			
144 150	214	75	Provisional filing f	ec	142	1,240	242	620	Utility issue fee (or reissue)		
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2, EA.	INAC	LAND F	LLS Fee fi	rom	122	130 50	122	130 50	Petitions to the Commissioner Petitions related to provisional applications		
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	45	-20** =	25 X 18.00		126	180	126	180	Submission of Information Disclosure Stmt		
Claims		-3	6 X 80 00	= 480.00	581	40	581	40	Recording each patent assignment per property (times number of properties)		
Multiple Depende] - [146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))		
Large Entity Fee Fee	Sma Fee	II Entity Fee	Fee Description		149	710	249	355	For each additional invention to be examined (37 CFR § 1.29(b))		
Code	(\$)	Code	(\$)		179	710	249	355	Request for Continued Examination (RCE)		
103 18	203	9	Claims in excess of	F20	169	900	169	900	Request for expedited examination of a design		
102 80	202	40	Independent claims	in excess of 3	Other	fee (spec	ify)				
104 270	204 135 Multuple dependent claim, if not paid										
109 80 209 40 ** Reissue independent claims over			* Red	uced by l	Basic F	ling Fe	ee Paid SUBTOTAL (3) (\$)				
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SUBTOTAL (2) \$ 930.00											
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SUBMITTED BY				Complete (if	applicable)
Name (Print/Type)	Jason H. Vick	Registration No. (Attorney/Agent)	45,285	Telephone	703-790-9110
Signature				Date	April 18, 2001